

# Late Independent Expenditure Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> Governor Schwarzenegger's California Recovery Team			<b>Date of This Filing</b> 11/05/2005  <b>Report No.</b> 741010  <input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)  <b>No. of Pages</b> 6	Date Stamp   Page 1 of 6	<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (916)768-2686		<b>I.D. NUMBER (if applicable)</b> 1261406			
<b>STREET ADDRESS</b>					
<b>CITY</b> Sacramento	<b>STATE</b> CA	<b>ZIP CODE</b> 95814			

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b>			<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b> Proposition 74			
<b>OFFICE SOUGHT OR HELD/DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b> 74	<b>JURISDICTION</b> Statewide	<b>SUPPORT</b> X	<b>OPPOSE</b>

## 2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/10/2005	TRS Staff/Spouse Travel; Lodging and Meals	\$98.06
10/10/2005	TRS Staff/Spouse Travel; Lodging and Meals	\$770.21
10/10/2005	TRS Staff/Spouse Travel; Lodging and Meals	\$450.87
10/10/2005	MTG Meetings & Appearances	\$665.43
10/10/2005	TRS Staff/Spouse Travel; Lodging and Meals	\$130.83

Reason for Amendment:

# Late Independent Expenditure Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

<b>NAME OF FILER</b> Governor Schwarzenegger's California Recovery Team			<b>Date of This Filing</b> 11/05/2005  <b>Report No.</b> 741010  <input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)  <b>No. of Pages</b> 6	Date Stamp   Page 2 of 6	<b>CALIFORNIA FORM 496</b> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (916)768-2686		<b>I.D. NUMBER (if applicable)</b> 1261406			
<b>STREET ADDRESS</b>					
<b>CITY</b> Sacramento	<b>STATE</b> CA	<b>ZIP CODE</b> 95814			

## 1. List Only One Candidate or Ballot Measure

<b>NAME OF CANDIDATE SUPPORTED OR OPPOSED</b>			<b>NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED</b> Proposition 74			
<b>OFFICE SOUGHT OR HELD/DISTRICT NO.</b>	<b>SUPPORT</b>	<b>OPPOSE</b>	<b>BALLOT NO./LETTER</b> 74	<b>JURISDICTION</b> Statewide	<b>SUPPORT</b> X	<b>OPPOSE</b>

## 2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/10/2005	CNS Campaign Consultants	\$763.67
10/10/2005	TRS Staff/Spouse Travel; Lodging and Meals	\$706.30

Reason for Amendment:

# Late Independent Expenditure Report

LATE INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA**  
**FORM 496**

NAME OF FILER  
Governor Schwarzenegger's California Recovery Team

I.D. NUMBER (If applicable)  
1261406

## 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
10/8/2005	Mr. Henry David Calabasas, CA 91372	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Partner HSD Investors, Llc	\$100.00	If loan, enter interest rate, if any _____ %
10/8/2005	Mr. Milan Korach Redondo Beach, CA 90277	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	\$100.00	If loan, enter interest rate, if any _____ %
10/8/2005	Mr. James Oldfield Jr. Fullerton, CA 92831	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Program Manager Raytheon	\$100.00	If loan, enter interest rate, if any _____ %
10/9/2005	Dr. Cesar Aristeiguieta Sacramento, CA 95814	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director State Of California	\$300.00	If loan, enter interest rate, if any _____ %
10/9/2005	Mr. Alan Holmberg Fresno, CA 93720	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Student N/A	\$50.00	If loan, enter interest rate, if any _____ %
10/10/2005	C. Neil Ash Rancho Santa Fe, CA 92067-1924	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	\$100.00	If loan, enter interest rate, if any _____ %

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

\*\*Contributor Codes  
IND - Individual  
COM - Recipient Committee (other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 496 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
866/275-3772

# Late Independent Expenditure Report

LATE INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA**  
**FORM 496**

NAME OF FILER  
Governor Schwarzenegger's California Recovery Team

I.D. NUMBER (If applicable)  
1261406

## 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
10/10/2005	Mr. Edward G. Atsinger III Camarillo, CA 93012	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President and Chief Executive Officers Salem Communications	\$25,000.00	If loan, enter interest rate, if any _____ %
10/10/2005	Dennis D. Shepard, M.D., Inc. Santa Maria, CA 93454	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor Dennis Shepard, M.D., Inc.	\$20,000.00	If loan, enter interest rate, if any _____ %
10/10/2005	Mr. Roland Hinz Valencia, CA 91355	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Hi-Torque Publications	\$25,000.00	If loan, enter interest rate, if any _____ %
10/10/2005	Bill Hoehn Rancho Santa Fe, CA 92067	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Auto Dealer Hoehn Motors	\$5,000.00	If loan, enter interest rate, if any _____ %
10/10/2005	Ms. Sally Jordan Santa Barbara, CA 93108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	\$5,000.00	If loan, enter interest rate, if any _____ %
10/10/2005	Mr. David Kernan Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investment Banking Catalina Capital Advisors	\$500.00	If loan, enter interest rate, if any _____ %

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

\*\*Contributor Codes  
IND - Individual  
COM - Recipient Committee (other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 496 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
866/275-3772

# Late Independent Expenditure Report

LATE INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA**  
**FORM 496**

NAME OF FILER  
Governor Schwarzenegger's California Recovery Team

I.D. NUMBER (If applicable)  
1261406

## 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
10/10/2005	Mr. Lawrence Lewis San Diego, CA 92109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	\$1,000.00	If loan, enter interest rate, if any _____ %
10/10/2005	Peter A. Lynch San Diego, CA 92129-4409	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cozen O'Connor	\$250.00	If loan, enter interest rate, if any _____ %
10/10/2005	Dr. Thomas Morris III Rancho Palos Verdes, CA 90275	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Not Employed	\$100.00	If loan, enter interest rate, if any _____ %
10/10/2005	Joel L Reed Rancho Santa Fe, CA 92067	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Principal Relational Advisors	\$25,000.00	If loan, enter interest rate, if any _____ %
10/10/2005	Mr. William Schill Atwater, CA 95301	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Full Time Dad N/A	\$100.00	If loan, enter interest rate, if any _____ %
10/10/2005	Dennis M. Weinberg Camarillo, CA 93012	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Arcus Enterprises, Inc.	\$25,000.00	If loan, enter interest rate, if any _____ %

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

\*\*Contributor Codes  
IND - Individual  
COM - Recipient Committee (other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 496 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
866/275-3772

# Late Independent Expenditure Report

LATE INDEPENDENT EXPENDITURE REPORT

**CALIFORNIA**  
**FORM 496**

NAME OF FILER

Governor Schwarzenegger's California Recovery Team

I.D. NUMBER (If applicable)  
1261406

## 3. Contributions of \$100 or More Received\*

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE**	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED	INTEREST RATES
10/10/2005	Mr. Endie Widjaja Yorba Linda, CA 92887	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Restaurant Operator El Pollo Loco	\$1,500.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

### \*\*Contributor Codes

IND - Individual  
COM - Recipient Committee (other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 496 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
866/275-3772